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ABSTRACT

It has been estimated that, by the year 2000, 30% of the American population will hold minority status. More than 50% of minority individuals who seek counseling services terminate after the first session, compared to 30% for white clients. This study examined whether counseling technique was a relevant factor in multicultural counseling by comparing the Rogerian person-centered approach to reality therapy in counseling dyads involving a white counselor and a black client. Black undergraduate students (N=31) viewed videotaped counseling sessions that used either reality therapy or person-centered therapy and completed feedback forms expressing their degree of satisfaction with each scene. The findings revealed that black students viewed reality therapy as more beneficial than person-centered therapy. Black students viewed reality therapy more favorably than person-centered therapy on 7 of 15 statements. The counselor in the reality scene was viewed as honest by 90% of subjects, while the counselor in the person-centered scene was viewed as honest by 52% of the subjects. Only 29% of the subjects felt that the client on the videotape should return to the person-centered counselor, compared to 81% who agreed that the client should return to the reality therapy counselor. (NB)

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"What I hear you saying is...": Comparison of two counseling approaches in interracial counselor-client initial interactions

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"What I hear you saying is...":

Comparision of two counseling approaches

in interracial counselor-client initial interactions

Abstract

The continual increase of ethnic minorities in the United States deserve attention. It is estimated that by 2000, 30 percent of the American population will hold minority status. More than 50 percent of minority individuals seeking counseling terminate after the first session, compared to 30 percent of Whites (Sue, 1990). Black Americans are presently the largest minority group in the United States. This paper examines whether or not counseling technique is a relevant factor in multicultural counseling. The Rogerian Person-centered approach will be compared to the Reality Therapy approach in counseling dyads involving a White counselor and a Black client. Emphasis is given to how listening is perceived in establishing trust, caring, and empathy in interracial counseling dyads, and if the client is empowered to continue counseling.

"What I hear you saying is...":

Comparison of two counseling approaches

in interracial counselor-client initial interactions

A recent report in Time (Henry, 1990) discussed "the Browning of America." According to the report the Black, Hispanic, and Asian populations are increasing at such a rapid rate that within two decades the White majority will become the minority. As the United States approaches the year 2000, "it is important for the U.S culture to listen accurately for crosscultural cues" (Borisoff & Purdy, 1991, p. 316).

With statistics showing that over half of ethnic minorities seeking counseling terminate after only one session, it becomes quite clear that counselors are not meeting the needs of minority clients (Sue, 1990). This paper focuses on counseling needs of Black Americans, particularly on the listening of interpersonal communication cues such as empathy, interest, honesty, and understanding during an initial interracial counselor-client interaction.

In counseling Black Americans, there are several factors to consider. The counselor needs to be aware of the different stages of minority development (Morten, Atkinson, and Sue, 1979), stereotypes, knowledge of minority cultures, and the problems facing minorities. More

importantly, counselors need to know themselves (Hulnick, 1977). Counselors need to know their own beliefs and attitudes regarding minorities, and be familiar with their own racial consciousness (Helms, 1984).

Wolvin and Coakley (1988) contend "Culture is a primary determinant of all communication behavior (including listening) because an individual's culture essentially serves to define who he or she is and how he or she will communicate through his or her perceptual filter...The influence of culture is especially prominent when one attempts to communicate across cultures" (p. 121).

Even when one considers all these factors, there are still questions left unanswered. For instance, does the counseling style used make a difference in multicultural counseling, and in this case interracial counseling? Parker (1988), expresses that "unfortunately, most of our present counseling theories are based on White middle class values, and are therefore ethnocentric" (p. 137).

Katz (1985) agrees that our current theories mirror prejudices of White theorists. One Black individual expressed that until recently, having a counselor was "a rich, White fad" (Rossi-Barrett, 1992). Counseling approaches were developed for the White middle class.

Given the various counseling approaches available, which are most effective with Black clients? Traditionally, it has been felt that Black clients are more responsive to action-oriented therapy, as it could be used to raise hopes and aspirations (Tucker, 1973). However, Smith (1977) feels that to use action-oriented approaches with Black clients is to stereotype them. This violates the promise of counseling--to see clients as individuals first, and members of a group second.

Listening is an important component in counseling. Wolvin and Coakley (1992) said that therapeutic listening "is listening to provide a troubled sender with the opportunity to talk through a problem" (p. 277). Wolvin and Coakley go on to state that there are five skills peculiar to therapeutic listening: (1) focusing attention, (2) demonstrating attending behaviors, (3) developing a supportive communication climate, (4) listening with empathy, and (5) responding appropriately.

"Intercultural listening is communication in which the processes of receiving, attending, and assigning meaning are influenced by cultural differences (Thomlison, 1991, p. 89). Could cultural or ethnic differences make a difference in perceiving that a counselor is maximizing therapeutic listening? Are other characteristics of

therapeutic listening such as empathy, responding appropriately, and the perception of other attending behaviors affected by cultural factors?

This study compares person-centered therapy with reality therapy. Since both therapies require the counselor to respond differently to the client, the goal was to determine which theory, if either, is seen as more beneficial with Black clients. Another specific goal was to find out if the counselor's therapeutic listening was perceived as more beneficial in either one of the two counseling approaches. Following is a discussion of both theories with regards to philosophy, goals, techniques, applications, contributions, and limitations of multicultural counseling.

Person-centered Therapy

Philosophy This is an existential approach developed by Carl Rogers. It holds that all humans have the ability to become fully functioning. The focus in this case is on the person, not on the problem. By increasing self-awareness, clients will be able to better cope with their problems.

Goals Provides a comfortable environment for clients to engage in self-exploration. The counselor enables the client to become more open, willing, and to trust themselves.

Technique There are few techniques. The client assumes responsibility for the direction of therapy. The counselor is an active listener. The client's statements are reflected and clarified. The counselor provides unconditional positive regard, to assist in the self-exploration process.

Applications Can be used with individuals or groups. Can be used in family therapy. Applicable for work with communities, management, human-relations, parent-child interactions. Can be used in working with groups from culturally diverse backgrounds.

Contributions to Multicultural Counseling This therapy respects client's values, uses active listening, and employs empathetic conditions. Cultural differences are welcomed, therapy is nonjudgemental. This type of therapy has been used with culturally diverse populations to break down communication barriers.

Limitations with Multicultural Counseling The lack of counselor direction may not be appropriate for client's seeking immediate advice. Some client's may have an external locus of control, this therapy implies that all humans have the capacity to help themselves. Person-centered therapy does not utilize advice giving, which may be helpful and expected with minorities.

Adapted from Corey, G. (1991).

Reality Therapy

Philosophy This theory indicates that individuals can control their behavior. Follows the idea that if a person has a success identity, they see themselves as significant, worthy, and capable of meeting their needs. It emphasizes responsiblity for behaviors, thoughts, and feelings.

Goals To assist people in becoming more effective in meeting their needs. It encourages clients to evaluate current behavior and assess how well this behavior meets their needs.

Techniques Counselors become personally involved with the client, demonstrating an attitude that promotes change. The client explores his/her wants and needs. Focus is on current behavior. Client evaluates behavior. When client is ready to change, the counselor and client plan actions, and the client makes a commitment to carry them out.

Applications Teaches people to live their lives effectively. Has been used individually with a wide range of clients, as well as in group counseling. Has also been used with youthful offenders, and in marriage and family therapy. In some instances it is well suited for brief therapy.

Contributions to Multicultural Counseling The focus is on the client's evaluation of behavior, which allows for cultural interpretation. Client can determine how well their needs are being satisfied. It is possible for a minority client to find a balance between retaining identity and integrating some of the values of the dominant society.

Limitations in Multicultural Counseling This theory stresses personal responsibility of one's life. This conflicts with clients who may want to change their external environment. The counselor needs to be aware of racism and prejudice, and be prepared to help the client deal with them.

Adapted from Corey, G. (1991).

Method

Subjects

One-hundred sixty undergraduate students served as voluntary participants. From these participants, the results of only the Black students were used (n = 31). The subjects ranged in age from 16 to 23 years old. There were 21 female, and 10 male participants.
All participants agreed to the informed consent (see Appendix A). The participants received extra credit for participating in the project.

Materials

Two 3-minute video tapes were created to be shown to the participants. One was based on reality therapy, the other based on person-centered therapy. Confederates were used to simulate a counseling session between a White counselor and a Black client. In order to eliminate bias, neither confederate was familiar with the counseling approaches used. The confederates conducted their session using scripts created in accordance with the philosophy, goals, techniques, and applications relevant to the type of therapy (Corey, 1991). The client's reason for seeking counseling remained constant throughout both scenarios, as did much of the client's dialogue

A feedback form was constructed to measure the

participants' degree of satisfaction with each scene. The form consisted of 15 statements, to which the participant on a scale from "strongly disagree" to "strongly agree", with four points in between. (See Appendix B.)

Before conducting the project, the video tape was shown to several people not involved in the study to check for validity and authenticity. Some of the individuals were counselor education students. It was generally agreed that the videos were consistent with their respective theories. It was felt that the client's issue was common.

Procedure

The purpose of the project was explained, and the informed consent read. The project was conducted with two groups. Each occurred in a lecture hall, where the video was shown on a large screen in front of the room. Each group viewed the first segment of the video. They were immediately instructed to complete the feedback form, based on what they had just seen. They were then shown the second segment, and instructed to complete an identical feedback form, based on the second scene. The order of the segments was reversed, so the first group saw the person-centered segment first; the second group viewed reality therapy first. All participants were given the opportunity to ask questions.

Results

The results were calculated to determine the mean. median, and standard deviation of each question for both questionnaires. The results are shown in Table 1 (P=person-centered, R=reality). The overall mean response for the person-centered therapy was 3.202. The overall mean response for the reality therapy was 4.155. Seven items were found to show significance at the $p < .05$ level. These were statements numbers 3, 8, 9, 10, 11, 12, and 15. An item analysis grid was constructed to compare the number of participants who responded for each rating on the scale for both video segments (see Table 2).

Discussion

The overall purpose of the study was to explore which therapy was perceived more favorably by Black students. Based on this investigation of interracial counseling dyads, reality therapy was viewed as more beneficial by Black students. Black students viewed reality therapy as more favorable then person-centered on seven of the fifteen statements, each at the $p < .05$ level of significance.

Comparison of Number of Persons Responding for Each Rating

Statement #		Strongly Disagree	Disagree	Slightly Disagree	Slightly Agree	Agree	Strongly Agree
P	1	1	4	4	10	10	2
R		1	1	3	9	10	7
P	2	3	7	5	9	5	2
R		1	6	1	9	8	6
P	3	5	11	5	7	2	1
R		1	3	3	9	10	5
P	4	5	10	4	9	1	2
R		1	2	1	12	10	5
P	5	1	9	5	8	7	1
R		2	3	2	10	12	2
P	6	6	9	4	9	2	1
R		6	4	8	7	5	1
P	7	0	3	4	10	8	6
R		0	0	2	3	20	6
P	8	7	12	7	3	2	0
R		2	2	3	5	16	3
P	9	2	5	8	8	4	4
R		1	0	2	6	18	4
P	10	4	6	9	7	3	2
R		0	4	4	12	9	2
P	11	14	4	7	2	4	0
R		2	6	7	7	7	2
P	12	11	6	5	4	4	1
R		3	1	2	10	11	4
P	13	3	5	3	4	5	11
		3	5	2	5	7	9
P	14	3	8	5	4	4	7
R		5	6	7	3	5	5
P	15	9	8	4	7	3	0
R		2	3	1	10	11	4

Table 1
Comparison of Mean, Median, and Standard Deviation per Statement

Statement #		Mean	Median	Std. Dev.	Significance
P	1	3.968	4.000	1.251	
R		4.516	5.000	1.235	____
P	2	3.387	4.000	1.430	
R		4.129	4.000	1.477	____
P	3	2.774	2.000	1.334	.05
R		4.452	5.000	1.287	
P	4	2.903	3.000	1.423	
R		4.387	4.000	1.202	____
P	5	3.452	4.000	1.312	
R		4.065	4.000	1.315	____
P	6	2.839	3.000	1.393	
R		3.129	3.000	1.455	____
P	7	4.323	4.000	1.222	
R		4.968	5.000	0.752	____
P	8	2.387	2.000	1.145	.05
R		4.323	5.000	1.376	
P	9	3.613	4.000	1.430	.05
R		4.677	5.000	1.013	
P	10	3.161	3.000	1.393	.05
R		4.032	4.000	1.110	
P	11	2.290	2.000	1.442	.05
R		3.548	4.000	1.387	
P	12	2.581	2.000	1.566	.05
R		4.194	4.000	1.400	
P	13	4.161	5.000	1.809	
R		4.323	5.000	1.620	____
P	14	3.613	3.000	1.745	
R		3.387	3.000	1.726	____
P	15	2.581	2.000	1.385	.05
R		4.194	4.000	1.376	

Question #7 which asked participants to rate how the counselor listened to the client, no significant difference was found between the person-centered and reality approaches. However, it should be noted that other variables associated with therapeutic listening showed statistical significance.

Statement #3 read, "The counselor gave good advice to (Tami) the client". When viewing the reality tape, 74% of the students agreed, compared with 29% when viewing the person-centered tape. This finding is not surprising since advice giving is more common with reality therapy, and is not as encouraged in person-centered therapy.

Seventy-seven percent of the subjects agreed that the therapist helped the client come up with solutions compared to 21% when viewing person-centered therapy. Again, this is a trait common with reality therapy.

Regarding counselor honesty, the counselor in the reality scene was viewed as honest by 90% of the participants, while the counselor in the person-centered scene was seen as honest by 52% of the participants.

Statement #10 dealt with the counselor caring what happened to the client in the video. Caring and empathy are counselor characteristics highly stressed in person-

centered therapy. However, after viewing the person-centered tape, only 39% saw the counselor as caring. In contrast, 74% of the participants agreed that the counselor was caring upon viewing the reality tape.

In analyzing statements 9 and 10, which deal with caring and honesty, speculations can be made about why the students responded the way they did. First, it could be concluded that the Black students interpreted the counselor's advice and suggestions as symbols of her honesty and caring. Although it was not at the $p < .05$ significance level, statement #5 addresses this as well. Only 52% of the participants agreed that the person-centered therapist understood the client's feelings, but 77% agreed that the reality therapist understood her. This challenges the person-centered belief that the best way to convey understanding is through active listening and summarizing feelings.

Also to be considered is the nature of the client's problem. Perhaps it is the client's problem that responds well to reality therapy, more than the client's race?

Statement #12 addressed whether or not the client should return to the counselor. This is an important factor, considering the number of minorities that terminate after one session. Only 29% of the participants felt that

the client should return to the person-centered counselor. However, in regards to the reality therapist, 81% agreed the client should return.

The final statement that had statistical significance was #15. This question asked how satisfied the client should be with the first counseling session. 81% of the participants felt the client should be satisfied after viewing the reality tape, compared with 32% who agreed after viewing the personcentered video. This finding corresponds positively with question #12, if one is satisfied with the session, one will be more likely to return.

McDavis (1981) suggests an electic approach to counseling many minority clients. The elective approach utilizes both the attending skills associated with personcentered therapy, such as reflection of feeling, paraphrasing, and summarizing, as well as the influencing skills of reality therapy, such as advice, action, and confrontation.

Of course each counseling situation and each client differ, and this calls for different counseling approaches. However, the client is not interested in counseling approaches. Clients want to know if the counseling is worth their time. Clients assess the success of the

counseling sessions with whether of not the counselor is listening to understand their problem. Counselors and clients may have different interpretations of the quality of listening in their sessions. Perhaps, when counselors paraphrase by saying "What I hear you saying is..." minority clients may want more than just attentiveness to indicate if the counselor is listening to them. This indication may instead take the form of action or direction.

Conclusion

In conclusion, the participants who viewed both tapes responded more favorably to the tape depicting reality therapy. In making this conclusion there are a few factors to consider. First, there is the consideration that the client's particular problem is more suited to reality therapy counseling. It is also suggested that the reactions of Black participants be compared with those of White participants, as well as participants from other minority groups. Still, another suggestion is to run multiple regression statistical tests that compare listening with other variables under study, including participants' perceptions of the counselor's empathy, interest, and honesty in the video situation.

While this exploratory study proved conclusive in some aspects, the door is open for a wide range of future

studies. Is therapeutic listening perceived differently by different ethnic groups? Is advice giving prized as an indication of listening more than attending and paraphrasing by different ethnic groups? At the very least, these questions attract further attention in this area.

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Appendix A

INFORMED CONSENT

This study is intended to investigate counseling approaches on a college campus. You will be asked to view a five-minute videotape which focuses on a counseling session between a counselor and a college student. Immediately after viewing the videotape you will be asked to fill out a brief survey about your reactions to the videotape. You may also be asked your age, gender, and cultural ethnicity.

There is no risk to you concerning your participation in the study. Your responses to the questionnaires will be conducted to assure your anonymity. No information which identifies individual participants in the study will be provided in subsequent reports on the project.

You will be asked if you wish to receive a report summarizing the findings of this study when you complete your participation. You may obtain this report by conducting the principal investigator(s) at the address/phone number below.

Your participation in this study is entirely voluntary. You may withdraw your participation at any point without prejudice. You will receive no monetary compensation for your participation. You may ask questions about the study at any time.

Appendix B
FEEDBACK FORM

Please circle the appropriate rating for each statement below. You should give your opinion for the scene that you have just viewed. If you have any questions, please ask for assistance.

1	2	3	4	5	6
Strongly Disagree	Disagree	Slightly Disagree	Slightly Agree	Agree	Strongly Agree

---

1. This counselor understood Tami's problem.

   1 2 3 4 5 6

2. This counselor was interested in what type of person Tami was.

   1 2 3 4 5 6

3. This counselor gave good advice to Tami.

   1 2 3 4 5 6

4. This counselor gave Tami hope that things would work out.

   1 2 3 4 5 6

5. This counselor undestood how Tami was feeling.

   1 2 3 4 5 6

6. This counselor knew something about Tami's culture.

   1 2 3 4 5 6

7. This counselor listened to what Tami needed.

   1 2 3 4 5 6

8. This counselor helped Tami come up with solutions.

   1 2 3 4 5 6

9. This counselor was honest.

   1 2 3 4 5 6

10. This counselor cared what happened to Tami.

    1 2 3 4 5 6

11. I would feel comfortable talking with this counselor.

12. Tami should go back to this person to talk to.

1 2 3 4 5 6

13. I have had feelings similar to Tami's.

1 2 3 4 5 6

14. I would go to a counseling center for help if I needed it.

1 2 3 4 5 6

15. Tami should be satisfied with how her first counseling session went.

1 2 3 4 5 6